

Office Use Only	
APPL	_____
RAD	_____
CK	_____

## Accredited Breeders Scheme

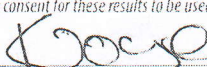
NZKC  
Private Bag 50903, Porirua 5240  
Phone: (04) 237-4489; Fax: (04) 237-0721  
www.nzkc.org.nz

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Only

## Application for Kidney Database

Please type or print legibly. To ensure accuracy please enclose copy of the dog's registration papers

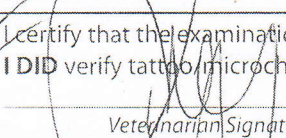
Previous application number (if any):		Registration number: 02818-2016	
Registered name: RAIDEN FLOWERS N CANDY		Sex: BITCH	Colour: BRINDLE
Breed: BULL TERRIER		Date of Birth (dd/mm/yy) 14/02/2016	
ID Number (if any): <input type="checkbox"/> Tattoo <input checked="" type="checkbox"/> Microchip 990000000349793		Registration number of Sire: 00016-2015	Registration number of Dam: 06563-2011
Owner Name: K JOYCE		Date of current examination (dd/mm/yy) 15 JUN 2017	
Co-owner Name:		Examining veterinarian's name or veterinary hospital: DR K WILKINSON	
Mailing address: 235 SOUTHFIELD DRIVE		Mailing address:	
City: LINCOLN	Postcode: 7608	Phone:	City: Postcode: Phone:
Phone (Mobile): 021 137 9328	email: raidenbullterriers@gmail.com	Phone (Mobile):	email: Kirsten @ totalvets.co.nz

<input checked="" type="checkbox"/> I declare that the details of the dog described are accurate and relate to the dogs tested. <input checked="" type="checkbox"/> I hereby authorise the release of the test results to the NZKC for publication on this dog's pedigree. <input checked="" type="checkbox"/> I give my consent for these results to be used for the purpose of statistical analysis and scientific research and for the statistical analysis and scientific research to be published.	
 (Signature of owner)	22-06-17 (Date)

### Veterinary Information

- ☒ Normal:<0.5 UP/UC Ratio  
☐ Abnormal:>0.5 UP/UC Ratio  
☒ Actual Value Reported (attach copy of laboratory report)

0-05

<input checked="" type="checkbox"/> I certify that the examination was performed according to the ABS procedure. <input checked="" type="checkbox"/> I DID verify tattoo/microchip information on this dog <input type="checkbox"/> I DID NOT verify tattoo/microchip information on this dog	
 Veterinarian Signature	15 JUN 2017 Date: (Date/Month/Year)

### Fees:

Fees for data base entry by submitter ..... \$5.00  
 Fees for data base entry by NZKC ..... \$35.00

Payments can be made by cheque, cash, bank deposit, Visa or Mastercard, payable to The New Zealand Kennel Club Inc

Card Number (Visa or Mastercard)

Name on Card

Expiry Date

PLEASE PRINT OUT AND TAKE TO YOUR VETERINARIAN

**Case No: CH1712975**

**Report To:** Total Veterinary Services  
 516 Gloucester Street  
 CHRISTCHURCH 8143

**Animal/Herd:** RAIDEN FLOWERS N  
**Species:** Canine **Age:** 6 MONTH(S)  
**Breed:** Bull Terrier **Sex:** Female

**Submitted by:** KIRSTEN WYLIE

**Submitter ref:** 257406A

**Owner:** Joyce, Katherine

**Date Sent:** 15/06/2017 09:01

**Date Received:** 15/06/2017 09:01

**Date Tested:** 15/06/2017 09:52

**Notification:** PEmail

**Owner Phone:** 3252993

**Fax Number:** 6433894565

Tests Requested:

1 x Urine - Urine Protein Creatinine Ratio

**Chemistry - Cumulative**

CH1712975  
 15/06/2017  
 RAIDEN  
 FLOWERS  
 N CANDY

Units Ref Interval

U. Protein (g/l)	0.14	g/l
Urine Creat	25950	umol/L
Urine Protein/Creat Ra	0.05	RATIO

Renal proteinuria is defined as persistently elevated UP/Cs greater than 0.5 in dogs, & > 0.4 in cats in which pre- and postrenal proteinuria has been ruled out. They may be of glomerular or tubulointerstitial origin.

UP/Cs greater than 1-2.0 are strongly suggestive of glomerular disease.

IRIS (International Renal Interest Society [www.iris-kidney.com](http://www.iris-kidney.com)) recommends that at least 3 urine samples are collected over a period of at least 2 weeks for sub-staging renal disease.

UP/C value		Substage
Dogs	Cats	
< 0.2	< 0.2	Non-proteinuric
0.2-0.5	0.2-0.4	Borderline proteinuric
> 0.5	> 0.4	Proteinuric

Test methodology references are available on request.

(Note: Results apply only to samples received, on an as found basis. Precision data will be supplied upon request. H = High result, L = Low result. Reference ranges are standard AHL reference ranges.)

**Signed** Bronwyn Evans- Thompson  
 (Technician - Ch)

**Signed** Bronwyn Evans- Thompson  
 (Technician - Ch)

**Report Date:** 15/06/2017 09:55

**Final**

**Report Fee (ex GST): \$18.81**

Gribbles Veterinary Pathology make every effort to collect, analyse and report the results of tests accurately and promptly but accepts no responsibility for any factors which influence the results that are beyond our control. This report should not be reproduced except in full.